

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

| | | | |
|---|--|---|--|
| NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund | | FEC IDENTIFICATION NUMBER C C00053553 | |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice | | | |
| Full Name (Last, First, Middle, Initial) of Payee Prolist Inc. | | Date M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 1 0 | |
| Mailing Address 8341 Beechcraft Avenue | | Amount 1881.30 | |
| City State Zip Code Gaithersburg MD 20879-1509 | | Transaction ID: 37160301 | |
| Purpose of Expenditure Postcards | | Office Sought: <input checked="" type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential | |
| Category/Type 004 | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Name of Federal Candidate supported or Opposed by expenditure: Sen. Richard M. Burr | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ | |
| Calendar Year-To-Date Per Election for Office Sought 13329.79 | | 2010 [MEMO ITEM] | |
| Full Name (Last, First, Middle, Initial) of Payee Prolist Inc. | | Date M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0 | |
| Mailing Address 8341 Beechcraft Avenue | | Amount 2565.57 | |
| City State Zip Code Gaithersburg MD 20879-1509 | | Transaction ID: 37176918 | |
| Purpose of Expenditure Postage | | Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> Presidential | |
| Category/Type 004 | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Name of Federal Candidate supported or Opposed by expenditure: Mr. David Schweikert | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ | |
| Calendar Year-To-Date Per Election for Office Sought 99956.63 | | 2010 [MEMO ITEM] | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | 0.00 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | |
| (c) TOTAL Independent Expenditures | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Mary Rose Adkins Signature | | Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0 | |